

“Taking a Deeper Dive into DHCFP’s Summer QA Efforts”

July 24, 2012



DIVISION OF
Health Care
Finance and Policy

Objectives for today's meeting

- Welcome and Introductions
- Preliminary Data Release
- Update on Quality Assurance Efforts
- Deeper Dive into QA Profile Reports
- Open Discussion

Preliminary Data Release: Status

- First completed application received from the Massachusetts Health Connector Authority
- The Massachusetts Health Connector intends to develop a state-specific risk adjustment model in support of its implementation of the Affordable Care Act
- Application was posted on July 13th for a 10 day comment period
- Application and comments will be reviewed by the Data Release Committee on Thursday, July 26th

Preliminary Data Release: Reminder

ME037	Health Care Home Tax ID Number	Masked
ME038	Health Care Home National Provider ID	Masked
ME039	Health Care Home Name	Masked
ME077	Members SIC Code	Masked
ME001 / ME036	Health Care Home Number	Masked
ME001 / ME040	Product ID Number	Masked
ME001 / ME107	Payer / CarrierSpecificUniqueMemberID	Masked
ME001 / ME117	Payer / CarrierSpecificUniqueSubscriberID	Masked
MC026	National Service Provider ID	Masked
MC077	National Billing Provider ID	Masked
MC001 / MC024	Payer / Service Provider Number	Masked
MC001 / MC032	Payer / Service Provider Specialty	Masked
MC001 / MC076	Payer / Billing Provider Number	Masked
MC001 / MC079	Payer / Product ID Number	Masked
MC001 / MC100	Payer / Delegated Benefit Administrator Organization ID	Masked
MC001 / MC112	Payer / Referring Provider ID	Masked
MC001 / MC125	Payer / Attending Provider	Masked
MC001 / MC132	Payer / Service Class	Masked
MC001 / MC134	Payer / Plan Rendering Provider Identifier	Masked
MC001 / MC135	Payer / Provider Location	Masked
MC001 / MC137	Payer / CarrierSpecificUniqueMemberID	Masked
MC001 / MC141	Payer / CarrierSpecificUniqueSubscriberID	Masked

← Used to hide uncertain values

← Values used to link between files

Quality Assurance Efforts

Initial Phase

- Implemented an intake system for processing APCD data submissions. The applications contains over 700 edits which are applied to the data and available on the DHCFP website.
- Established a 3-tier team approach to insure that submitters have access to support at various levels:

Each carrier is assigned to a Liaison that will aid them with certification documents, testing, reporting and variance updates based upon business model.

Additionally each carrier is also assigned to an Analyst to provide post-intake feedback on data quality and inter-element dependencies.

Technical Advisory Group calls are held monthly with the APCD Staff and carriers to discuss intake, editing, or reporting issues to be resolved.

Quality Assurance Efforts (continued)

- Established analytic and technical work groups to engage internal and external stakeholders on quality assurance issues.

More Recently

- Contracted with Jen Associates of Cambridge, MA to design and report quality assurance metrics on all APCD data file types.
- Currently working with Milliman Associates to assess the quality of the data for the Connector's 3R project.
- Currently working with the Division of Insurance on a number of projects related to the ACA.

Quality Assurance Efforts (continued)

Milliman's Activities:

- Perform preliminary analysis of each carrier's product and eligibility file
- Associate the product file to the eligibility file for the correct time period and the correct mix of attributes
- Filter members to include those needed for the analysis and exclude others
- Identify Medical and/or Pharmacy Claim lines to link to selected Eligibilities by time period.
- De-duplicate claims lines and identify highest-version
- Calculate total Out-of-Pocket expenses for individuals by Copay/Coinsurance/Deductible amounts.
- Utilize claims information to supplement Eligibility information to calculate Family and Family Size.

Quality Assurance Efforts (continued)

APCD Challenges Related to Milliman's Analysis:

- First use of APCD data for analytic purposes
- Addressing duplicates within files types
- Linking across file types
- Uniquely identifying members
- Correctly filtering members and products for business requirements
- Identifying all related claims for a member
- Determining final version of claim
- Addressing quality and completeness issues

Quality Assurance Efforts (continued)

Benefits Related to Milliman's Analysis:

- Quality issues have been identified and DHCFP is engaging carriers in remediation
 - Benefit flags all set to the same valid value (all set to unknown)
 - Use of repeating values to indicate null (all 999s)
- Addressing completeness of the data
 - Comparing counts to benchmarks and identifying missing data
- Heightened awareness of the complexity of the data
 - Multiple active eligibility lines under multiple active products
- Gaining deeper appreciation for the broadness of the data

Quality Assurance Efforts (continued)

QUESTIONS?

Deeper Dive into QA Profile Reports



Deeper Dive into QA Profile Reports

Initial Profile reports have been created and shared with submitters. The reports are being used by the Division to assess the **quality** and **completeness** of the data

The QA Profile Reports contain the following metrics:

- Monthly counts of records submitted to APCD by file type
- Mean, Median, Mode, Variance, Standard Deviation, Minimum, Maximum, Quantiles for all numeric data elements
- Frequency of values for alphanumeric data elements
- Time analysis of submitted records and unique member IDs over time

Deeper Dive into QA Profile Reports (Draft)

Payer	# Eligible Unique IDs	# Eligible ID Months	\$ Medical	Lines Medical	\$ Dental	Lines Dental	\$ Pharmacy	Lines Pharmacy	# of Eligible Unique IDs with Medical Use	# of Eligible Unique Idswith Dental Use	# of Eligible Unique IDs with Pharmac y Use
XXXXX	21,076	185,420	\$ 27,267,849	154,776	.	.	.	.	13,953	.	.
XXXXX	1,951	13,446	.	.	.	.	.	.	.	.	.
XXXXX	768	8,053	.	.	.	.	.	.	.	.	.
XXXXX	389,375	3,248,775	\$370,448,363	3,053,392	\$19,672,282	245,797	\$ 33,743,161	460,378	117,842	69,342	41,765
XXXXX	.	.	.	.	.	.	.	.	.	.	.
XXXXX	74,983	550,022	\$ 83,140,967	544,731	\$ 136,970	956	\$ 7,530,723	142,404	39,082	338	16,304
XXXXX	142,810	1,550,170	.	.	\$31,314,100	420,582	.	.	.	85,281	.
XXXXX	495	4,294	\$ 995,893	7,999	.	.	\$ 223,106	3,536	363	.	265
XXXXX	7,845	63,939	.	.	.	.	.	.	.	.	.
XXXXX	91,163	731,296	\$ 39,757,541	604,280	.	.	.	.	26,619	.	.
XXXXX	.	.	.	.	.	.	.	.	.	.	.
XXXXX	.	.	.	.	.	.	.	.	.	.	.
XXXXX	13,639	156,078	.	.	.	.	.	.	.	.	.
XXXXX	42,396	465,250	\$ 44,430,738	1,201,965	.	.	.	.	30,620	.	.
XXXXX	115,212	1,301,682	.	.	.	.	.	.	.	.	.

Deeper Dive into QA Profile Reports (Draft)

Payer	# Eligible Unique IDs	# of Not Eligible Unique IDs	# of Not Eligible ID Use Months	\$ of Medical with no Eligibility	# of Lines of Medical with no Eligibility	\$ of Dental with no Eligibility	# of Lines of Dental with no Eligibility	\$ of Pharmacy with no Eligibility	# of Lines of Pharmacy with no Eligibility	# of Not Eligible Unique IDs with Medical Use	# of Not Eligible Unique IDs with Dental Use	# of Not Eligible Unique IDs with Pharmacy Use
XXXXX	21,076	53	138	\$ 287,011	262	.	.	.	.	53	.	.
XXXXX	1,951	1,157	2,187	.	.	\$ 505,748	5,654	.	.	.	1,157	.
XXXXX	768	7,111	12,979	.	.	\$4,455,995	54,376	.	.	.	7,111	.
XXXXX	389,375	59,116	190,002	\$112,493,631	863,889	\$3,489,960	43,254	\$ 10,854,093	179,130	36,762	12,737	22,921
XXXXX	.	1,478	7,117	.	.	.	.	\$ 1,831,337	21,435	.	.	1,478
XXXXX	74,983	59,926	205,089	\$151,839,474	874,767	\$ 217,119	1,349	\$ 5,417,718	100,397	57,996	479	13,540
XXXXX	142,810	11,224	17,253	.	.	\$3,223,755	41,693	.	.	.	11,224	.
XXXXX	495	187	650	\$ 385,815	3,586	.	.	\$ 29,930	548	170	.	76
XXXXX	7,845	1,279	2,668	\$ 11,282	10,322	.	.	.	.	1,279	.	.
XXXXX	91,163	23,859	104,289	\$ 1,261,607	18,197	\$ 113,524	2,300	\$ 15,184,668	370,769	1,588	414	22,911
XXXXX	.	2,004	3,909	\$ 1,572	38	\$ 756,656	9,280	.	.	6	1,945	.
XXXXX	.	863	1,624	\$ 2,414	57	\$ 291,689	3,795	.	.	11	831	.
XXXXX	13,639	8,746	17,266	\$ 81,619	1,825	\$3,655,995	44,824	.	.	86	8,660	.
XXXXX	42,396	350	553	\$ 126,048	3,377	.	.	.	.	350	.	.
XXXXX	115,212	109,347	934,073	\$185,592,933	1,085,080	.	.	\$252,130,790	4,231,143	17,860	.	91,487

Deeper Dive into QA Profile Reports

Why are there claims that do **not** match eligibility?

What could cause a **change** in Carrier Specific Unique Member ID?

- Multiple products / multiple ids
- Life changes / new employer

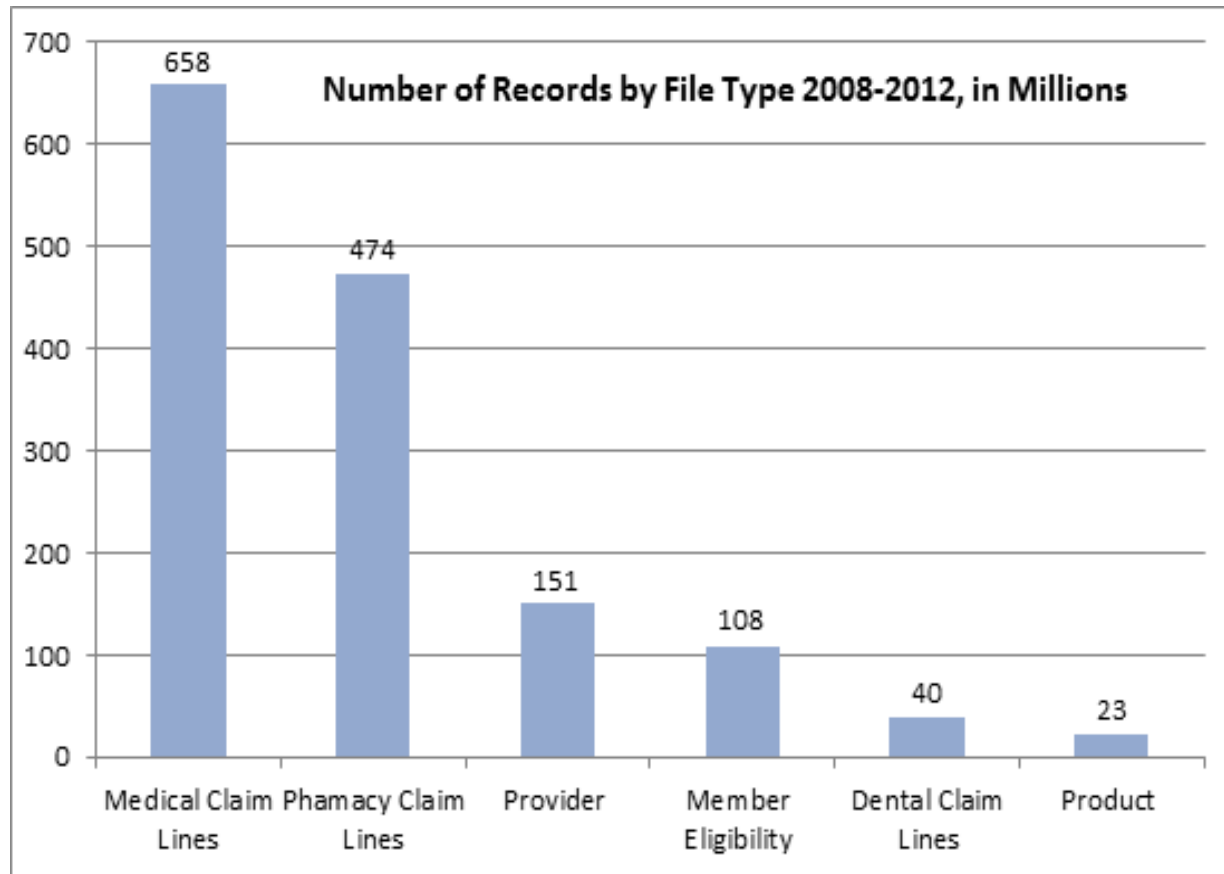
Final Version of Claim Line: Pattern Analyses

Payer	Count	Negative Values	Sequence of Versions	Sequence of ClaimLineType	Frequency	Percent
XXXXX	1	N	0	O	145702	85.0%
XXXXX	1	N	1	R	15594	9.1%
XXXXX	2	N	00	O V	3959	2.3%
XXXXX	2	N	00	O O	1584	0.9%
XXXXX	1	N	0	V	1337	0.8%
XXXXX	1	N	2	R	1329	0.8%
XXXXX	2	N	11	R V	493	0.3%
XXXXX	1	N	14	R	258	0.2%
XXXXX	2	N	11	R R	218	0.1%
XXXXX	1	N	3	R	216	0.1%
XXXXX	3	N	000	O O O	127	0.1%
XXXXX	1	N	1	V	98	0.1%
XXXXX	1	N	4	R	73	0.0%
XXXXX	2	N	22	R V	58	0.0%
XXXXX	4	N	0000	O O V V	40	0.0%
XXXXX	4	N	0000	O O O O	35	0.0%
XXXXX	2	N	22	R R	27	0.0%
XXXXX	1	N	5	R	24	0.0%
XXXXX	1	N	15	R	20	0.0%
XXXXX	3	N	111	R R R	19	0.0%
XXXXX	5	N	00000	O O O O O	18	0.0%
XXXXX	2	N	33	R V	16	0.0%
XXXXX	1	N	0	R	14	0.0%
XXXXX	1	N	2	V	14	0.0%
XXXXX	4	N	1111	R R V V	9	0.0%

Final Version of Claim Line: Pattern Analyses

Payer	Count	Negative Values	Sequence of Versions	Sequence of ClaimLineType	Frequency	Percent
XXXXX	1	N	1.....	O	66,028	27.77%
XXXXX	2	N	1 2.....	O O	23,678	9.96%
XXXXX	2	Y	1 2.....	A R	17,199	7.23%
XXXXX	2	Y	1 2.....	R A	17,087	7.19%
XXXXX	3	N	1 2 3.....	O O O	8,256	3.47%
XXXXX	3	Y	1 2 3.....	A R O	7,677	3.23%
XXXXX	3	Y	1 2 3.....	R A O	7,657	3.22%
XXXXX	2	Y	1 2.....	R O	7,303	3.07%
XXXXX	4	Y	1 2 3 4.....	R R A A	6,639	2.79%
XXXXX	4	Y	1 2 3 4.....	A A R R	6,512	2.74%
XXXXX	2	Y	1 2.....	O R	5,079	2.14%
XXXXX	6	Y	1 2 3 4 5 6...	A A R R O O	3,255	1.37%
XXXXX	6	Y	1 2 3 4 5 6...	R R A A O O	3,223	1.36%
XXXXX	4	Y	1 2 3 4.....	R R O O	3,217	1.35%
XXXXX	1	N	3.....	O	3,105	1.31%
XXXXX	4	N	1 2 3 4.....	O O O O	2,412	1.01%
XXXXX	4	Y	1 2 3 4.....	O O R R	2,218	0.93%
XXXXX	6	Y	1 2 3 4 5 6...	R R R A A A	1,693	0.71%
XXXXX	6	Y	1 2 3 4 5 6...	A A A R R R	1,684	0.71%
XXXXX	4	Y	1 2 3 4.....	A R R A	1,536	0.65%
XXXXX	4	Y	1 2 3 4.....	A R A R	1,526	0.64%
XXXXX	4	Y	1 2 3 4.....	R A R A	1,515	0.64%
XXXXX	4	Y	1 2 3 4.....	R A A R	1,467	0.62%
XXXXX	2	N	5 6.....	O O	1,409	0.59%
XXXXX	2	N	1 1.....	O O	1,376	0.58%
XXXXX	6	N	1 2 3 4 5 6...	O O O O O O	1,318	0.55%
XXXXX	5	Y	1 2 3 4 5.....	R A R A O	1,115	0.47%

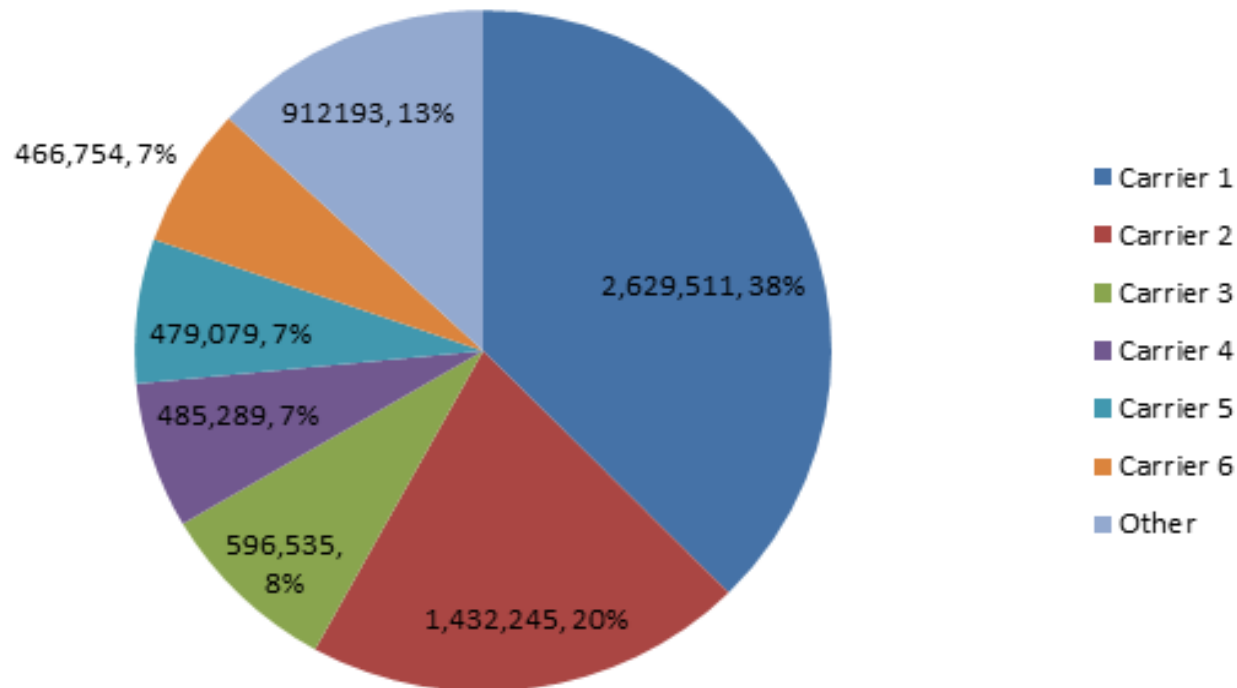
Scope of QA Efforts



Other QA Efforts: Dental

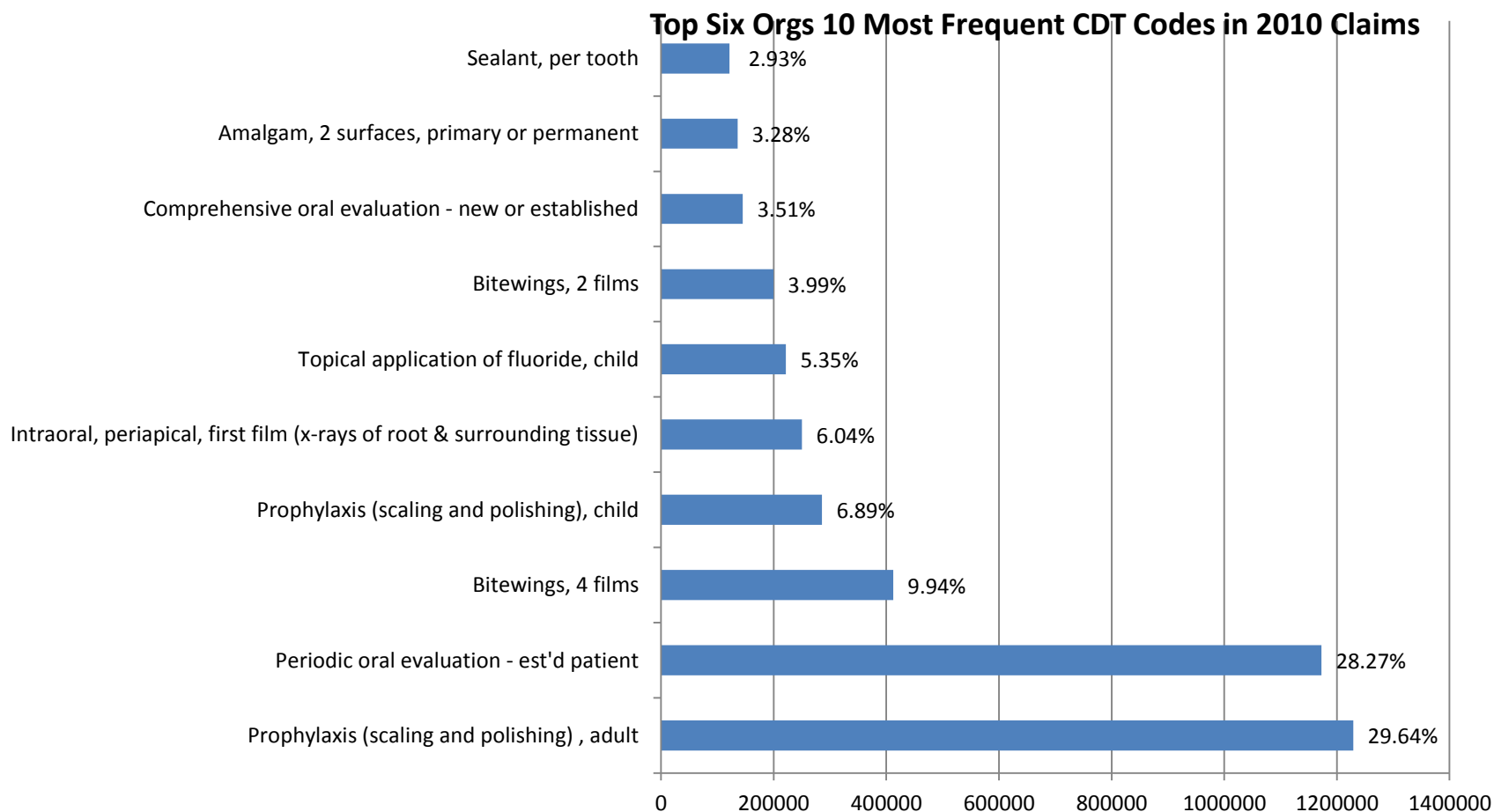
(Draft)

2010 APCD Dental Claim Lines by Carrier



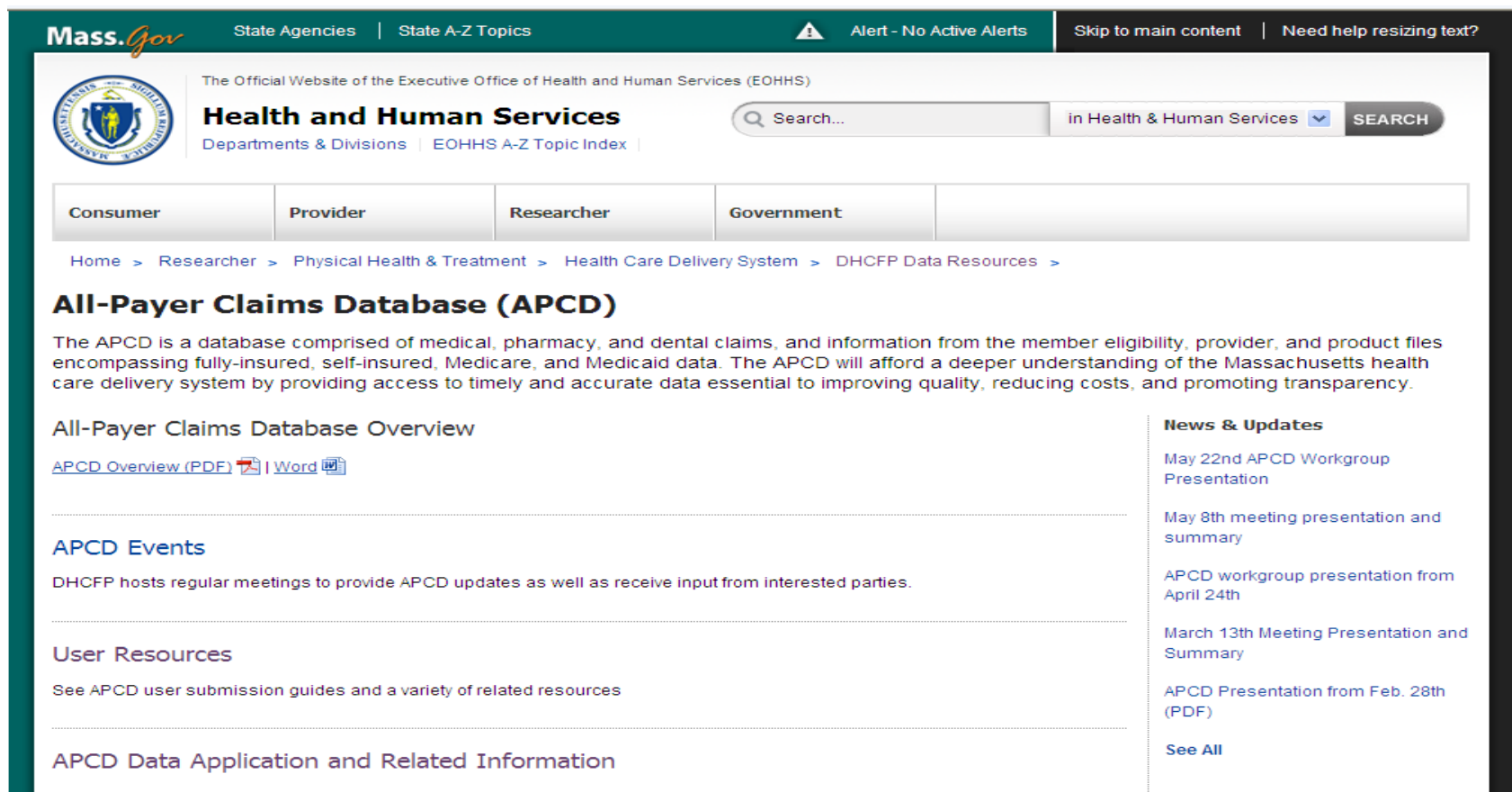
Other QA Efforts: Dental

(Draft)



APCD Resources for Payers

Updated APCD Website - www.mass.gov/dhcfp/apcd



The screenshot shows the official website of the Executive Office of Health and Human Services (EOHHS) for the All-Payer Claims Database (APCD). The header includes the Mass.gov logo, navigation links for State Agencies and State A-Z Topics, an alert bar indicating no active alerts, and links to skip to main content or need help resizing text. The main content area features the EOHHS logo, a search bar, and a navigation menu with tabs for Consumer, Provider, Researcher, and Government. The breadcrumb trail indicates the current location: Home > Researcher > Physical Health & Treatment > Health Care Delivery System > DHCFP Data Resources >. The main heading is "All-Payer Claims Database (APCD)", followed by a paragraph describing the database's purpose. Below this are sections for "All-Payer Claims Database Overview" (with links to PDF and Word versions), "APCD Events" (noting regular meetings), "User Resources" (linking to submission guides), and "APCD Data Application and Related Information". A right-hand sidebar titled "News & Updates" lists recent presentations: May 22nd APCD Workgroup Presentation, May 8th meeting presentation and summary, APCD workgroup presentation from April 24th, March 13th Meeting Presentation and Summary, and APCD Presentation from Feb. 28th (PDF), with a "See All" link at the bottom.

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All-Payer Claims Database (APCD)

The APCD is a database comprised of medical, pharmacy, and dental claims, and information from the member eligibility, provider, and product files encompassing fully-insured, self-insured, Medicare, and Medicaid data. The APCD will afford a deeper understanding of the Massachusetts health care delivery system by providing access to timely and accurate data essential to improving quality, reducing costs, and promoting transparency.

All-Payer Claims Database Overview

[APCD Overview \(PDF\)](#) | [Word](#)

APCD Events

DHCFP hosts regular meetings to provide APCD updates as well as receive input from interested parties.

User Resources

See APCD user submission guides and a variety of related resources

APCD Data Application and Related Information

News & Updates

- May 22nd APCD Workgroup Presentation
- May 8th meeting presentation and summary
- APCD workgroup presentation from April 24th
- March 13th Meeting Presentation and Summary
- APCD Presentation from Feb. 28th (PDF)

[See All](#)

APCD Resources for Payers

Updated USER RESOURCES section -

User Resources - Health and Human Services - Mass.Gov - Windows Internet Explorer






















http://www.mass.gov/eohhs/researcher/physical-health/health-care-delivery/hcf-data-resources/apcd/user-resources.html

Google

Favorites User Resources - Health and Human Services - Mass....

Page Safety Tools

All-Payer Claims Database User Submission Guides

User Submission Guides	Format	Edits
Medical Claims File Submission Guide	PDF  / Word 	Zip File 
Pharmacy Claims File Submission Guide	PDF  / Word 	Zip File 
Dental Claims File Submission Guide	PDF  / Word 	Zip File 
Member Eligibility File Submission Guide	PDF  / Word 	Zip File 
Product File Submission Guide	PDF  / Word 	Zip File 
Provider File Submission Guide	PDF  / Word 	Zip File 
Master List of File Edits (includes edits to Medical Claims, Dental Claims, Pharmacy Claims, Member Eligibility, Product File, and Provider File)	PDF  / Excel 	Zip File 

Internet 200%

For more information:

Upcoming Schedule	
APCD Combined Workgroup 4 th Tuesday of each month	Next meeting on August 28 th
APCD Technical Assistance Group (TAG) Webinar 2 nd Tuesday of each month	Next meeting on August 14 th

- Send questions and feedback to dhcfp.apcd@state.ma.us
- For more information, including important updates and events, please visit: www.mass.gov/dhcfp/apcd